## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

**1998** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L05303

(7)

GAINESVILLE TITLE AND ABSTRACT, INC.

D.

## FILED May 13 1998 8:00am Secretary of State



						— I IERNON OK BAHAN OHAN ININ DONKO			<u>                                      </u>	
Principal Place of Business Mailing Address										
2631 N.W. 41ST STREET. SUITE C-3 Gainesville FL 32606		22 WILLOW DRIVE ST. AUGUSTINE FL 32084			DO NOT WE!	T 151 TI 110 1	SDAGE			
					DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified				$\neg$	
						07/27/1989				
2. Princip	al Place of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number Applied For				-
21		26			59-2958160			Not Applicable	e	
	Apt. #, etc.	Suite, Apt. #, etc.	· • · · · · · · · · · · · · · · · · · ·						Additional	7
22	,	27	27			5. Certificate of Status Desired	Ш		Required	
City &	State	City & State	<u> </u>			6. Election Campaign Financing		\$5.0	O May Be	7
23	28					Trust Fund Contribution			d to Fees	╝
Zip	Country Zip			itry		8. This corporation owes or has p	aid the cur			
24	25	29	30			Personal Property Tax due June 30.  Yes No				
	g, Name and Address of Curr	ent Registered Agent		T		10. Name and Address of New F	egistered	Agent		-
	GAMSEY, KAREN H		(1	B1	Name					- [
	2631 N.W. 41ST ST.		ļ.	82	Street Add	ddress (P.O. Box Number is Not Acceptable)			·	
	SUITE C-3		-	-						4
	GAINESVILLE FL 32606		['	83						
			Ī	84	City		FL	85 Z	p Code	٦
<b>11.</b> Pursi	ant to the provisions of Sections 607.0	502 and 607 1508 Florida State	iles the ah		-pamed cor	poration submits this statement for the	DUITOOSE O	changing	its registered	ᆏ
office	or regi <b>ste</b> red agent, or both, in the Sta L. Larri f <b>am</b> iliar with, and accept the obl	ite of Florida. Such change was	authorized:	by	the corpora	tion's board of directors. I hereby acc	ept the app	ointment i	as registered	
SIGNATU	RE	3					DATE		·····	1
Signature, typed or predefinance of registered agent end tits if upplicable  OFFICERS AND DIRECTORS			(NOTE: Registered Agent signature req			ADDITIONS/CHANGES TO OFF		DIBECTO	ORS IN 12	네6
TITLE	PO	DELETE	11 111	.E		ADDITIONAL TO ST	IOLIIO XIII	Change		Ţ
NAME	GAMSEY, DAVID S.		1.2 NAME							13
STREET ADDR	AS MILLOW DD		1.3 STREET ADI							8
CITY-ST-ZIP	ST. AUGUSTINE FL 32084		1.4 CITY-ST-ZIP							18
TITLE	VTSD	DELETE	2.1 7111					Change	e 🔲 Addition	ቭኛ
NAME	GAMSEY, KAREN H.		2.2 NAM	ME						
STREET ADOR			2.3 STR	EET A	ADDRESS					
CITY-ST-21P	ST. AUGUSTINE FL 32084			Y-\$	T-ZIP					_}
TITLE		DELETE 3.1 T						☐ Change	e 🔲 Addition	٦
NAME			3.2 NAM	ME						
STREET ADOR	3.3			EET /	ADDRESS					
CITY-ST-ZIP				Y-\$1	1 - ZIP					
TITLE		DELETE 4.1			ļ			Change	e 🔲 Addition	١ [
NAME			4. 2 NA	ME						
STREET ADDR	ESS		4.3 STREE		ADDRESS					
CITY-ST-ZIP			4.4 C(T)		- ZIP					_
TITLE		☐ DELETE	5.1 Titl					Change	Addition	1
NAME			5.2 NAM							
STREET ADOR					ADDRESS					-
CITY-ST-ZIP					I - ZIP		·	Chara		_
TITLE	DELETE		6.1 TITU		1			Change	e	۱
NAME			6.2 NAM							
STREET ADDR	ESS		6.3 STR	EET A	address					

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

LANCEY V.D. WARREN H. CAMCEY V.D. W. 12-08